

the public health officials to undertake the treatment of all cases of syphilis at public expense. It was declared that whenever and wherever possible patients should be treated by family physicians in the usual manner and that the personal relationship of patient to physician should be maintained wherever possible. The section reported that in its judgment the treatment of indigent and borderline patients in clinics would be a necessity. Adequate social service for the clinic to ascertain the degree of ability to pay was dealt with in another section. Reporting of the venereal diseases was stressed as a necessity in their control. The section recommended that the Surgeon-General request reporting by name and address as in the case of other communicable diseases. This recommendation of the section was opposed from the floor of the conference and ultimately was amended to read, in effect, that reporting by name and address be encouraged where practicable, but that in other localities reports by number or by initials and date of birth be accepted for the present in order to allow opportunity for overcoming the well-known reluctance of physicians to report venereal diseases by name. The necessity for furnishing laboratory service gratis and for the free distribution of drugs needed in the treatment of venereal diseases through public health authorities was stressed. A recommendation to the effect that prophylaxis be regarded as an integral part of the syphilis program was opposed from the floor. The opposition, however, was overwhelmingly defeated and the report of the section, therefore, included the recommendation that prophylaxis be included in the antisiphilic program.

3. The section on treatment presented a voluminous report, of which the salient points were the importance of early treatment and the treatment of the pregnant syphilitic woman. Emphasis was laid on the necessity for continuous treatment except in the case of late syphilis in persons of middle age or beyond; on the importance of confining the distribution of drugs through public health departments to established preparations, namely, the arsenicals, bismuth compounds, mercury ointments, and possibly iodid preparations.

4. The section on medical follow-up of the venereal disease patient reported the importance and necessity for follow-up in certain types of cases. Much follow-up work can be prevented by efficient, courteous, and expeditious handling of patients on their first visit to the clinic. . . .

5. The section on cooperation of the private physician in the control of venereal diseases made a report which indicated the dual responsibility of the physician in any case of communicable disease, including the venereal diseases. This responsibility is for the patient and for the community. . . .

The principles here presented seemed in general to meet with the approval of all groups represented. Recognition was given to the fact that conditions in the United States differ widely in different localities and even sometimes within a single community, and that programs, subject only to general fundamentals, must be varied and adapted to meet local needs. . . .

In all probability most indigent patients in denser population centers will need to be treated in clinics. In smaller communities and rural areas, treatment of the indigent was recommended through the offices of family physicians. The recommendations included payment of the physician on such a basis as might locally be agreed on for services rendered to indigent patients. Certain questions were raised relating to the lack of uniformity of instruction in syphilology in the medical schools. . . .

CALIFORNIA STATE BAR CHASES AMBULANCE CHASERS*

The State Bar of California has a committee, known as Special Local Administrative Committee No. 1, whose duty is to investigate and institute prosecutions of ambulance chasers, both lay and attorney. The personnel of this committee is John E. Biby (chairman), John M. Bowen, and Robert M. Clarke; staff, Philbrick McCoy, counsel, and Herbert Hallner, special investigator.

The above-named committee has been successful in securing convictions and pleas of guilty in more than fifty cases. Many of the offenders have received jail sentences

of 180 days and fines in the amount of \$500. Among those convicted was a member of the medical profession.

Of interest to the medical profession is the fact that this committee has in several instances secured information to the effect that certain physicians are very active in the solicitation of business for certain attorney ambulance chasers. This condition appears quite aggravated among some of the physicians who conduct private emergency hospitals. One such offered medical treatment and hospitalization to an injured person if he would employ a certain attorney to prosecute his claim for damages, the cost thereof to be paid only out of any money recovered!

This State Bar committee frequently finds it difficult to prove the facts necessary to secure a conviction in these cases. Its investigations disclose that the attorney involved has received a written or telephone request from the injured person to call on him; and, when questioned, the attorney invariably says he did not know the request was instigated by the physician. The physician often excuses his conduct by stating that the injured person requested him to recommend an attorney.

The State Bar deserves commendation for the work it is doing to eliminate the evils arising out of ambulance chasing. Any member of the medical profession acquiring knowledge that a physician is in any manner aiding an ambulance chaser should report at once to any member of the State Bar committee or its staff, or to The State Bar, 440 Rowan Building, Los Angeles (Los Angeles telephone, Michigan 9551). Such cooperation with the State Bar will do much to purge both professions of the odium cast upon them by members who are aiding or cooperating as ambulance chasers.

HEALTH INSURANCE PROPAGANDA*

On Monday, November 23, 1936, a newspaper of the city, the *New York Herald-Tribune*, gave its columns over to a piece of propaganda which deserves attention. Under date of November 22, 1936, and presumably coming from Washington, a feature article is written, headed "Health Insurance Study Is Instituted by Security Board."

Like all propaganda, the "news-spread" necessarily must be tacked to some event, and so this time we find it tacked to some casual recommendations made by Harry Hopkins, WPA Administrator, in a speech to the United States Conference of Mayors recently; and, incidentally, it is also tacked to a report of the Executive Council of the American Federation of Labor. Then, not giving either the speech made by Mr. Hopkins or the substance of the report of the Executive Counsel of the American Federation of Labor, the propagandist in question hides his identity under the statement, "A spokesman for the Social Security Board." For the rest of a column and a half of ordinary newspaper space there is nothing but argument and propaganda, and little or no factual news. In the end the reader is left to wonder *who* is advocating health insurance, who is putting forth the arguments for it, who says that it is to be considered purely as a tax measure, and who is it that is forcing attention to it and arousing argument.

The stress presented in the newspaper broadcast consists primarily in the fact that existing systems of unemployment compensation and old-age benefits "are generally believed in Security Board circles as measures to bring health insurance to the fore" and "almost all European countries have comprehensive plans of health insurance providing cash benefits in disability and invalidity and supplying medical aid." The plea ends with the statement that it can be conducted on a pay-as-you-go plan.

In the September 1 issue of the *New York State Journal of Medicine*, editorial note was made of the "lull before the storm." An ominous silence was noticed on the part of the protagonists for health insurance. We were then aware that the protagonists of health insurance had not quit. We rather resent the fact, however, that *government agencies* should engage in propaganda to create a demand for something which the public has neither asked for nor needs.

The news release also announces that more time to study the proposition is asked. We seriously recommend that it be studied; that comparison be made of the morbid-

* By J. E. B.

* Editorial from *The New York Medical Week*, November 28, 1936.